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Complete and send this form, together with applicable fee(s), to: **Mail**

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BRENDA PHILLIPS   (Depositor's name)
Brenda Phillips   (Signature)
7-26-05   (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/051,731	01/22/2002	Marshall L. Nuckols	83,319	8651

TITLE OF INVENTION: SYSTEM FOR SIMULATING METABOLIC CONSUMPTION OF OXYGEN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1400	$300	$1700	09/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEWIS, AARON J	3743	128-200240

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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1 JAMES T. SHEPHERD

2 _____

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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The United States of America as
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☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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fax transmittal

To: | ISSUE FEE

Fax #: | 703-746-4000

From: | Brenda Phillips

Date: | July 26, 2005

re: | Ser No. 10/051,731

Pages: | 2 pages, including fax cover sheet